# **CALIFORNIA FORM** FAIR POLITICAL PRACTICES COMMISSION

O The period covered is \_

☐ Candidate

the date of leaving office.

Election Year: \_

J\_\_\_\_, through

STATEMENT OF ECONOMIC INTERESTS

Date Received

| ,   | FAIR POLITICAL PRACTICES COMMISSION  2019 MAR 15                                | km 8: 35                         | (    | COVER P                                 | AGE                         |  | MARIA DE L                                  |   |
|-----|---|----------------------------------|------|---|-----------------------------|--|---|---|
| i g | Please type or print in ink.  | ,                                | A P  | ublic Do                                | cument                      | Ĺ  | YOLO COUNTY<br>CLERK/RECORDER               | ¥ |
|     | NAME (LAST)   | (FIRST)                          |      |   | (MIDDLE)                    |  | DAYTIME TELEPHONE NUMBER                    |   |
|     | Rexroad   | Matthey                          | U    |   | John                        |  |   |   |
|     | MAILING ADDRESS STREET<br>(Business Address Acceptable)                         | CITY                             |      |   | STATE                       | ZIP CODE   | OPTIONAL: E-MAIL ADDRESS                    |   |
|     | J   |                                  |      |   |                             |  |   |   |
| Ì   | 1. Office, Agency, or Court   |                                  |      | 4. S                                    | chedule                     | Summar   | V   |   |
|     | Name of Office, Agency, or Court:   |                                  |      | 1                                       | tal number                  | THE STATE OF THE S | a   |   |
|     | County of Yolo  | 质                                |      |   |                             | cover page   | : <del></del>                               | 0 |
|     | Division, Board, District, if applicable:                                       |                                  |      |   |                             | ble schedul  | es or "No reportable                        |   |
|     | Board of Superviso  | 5                                |      | 477.0                                   | erests."                    |  |   |   |
| d   | Your Position:  |                                  |      |   | ave disclose<br>ached sched |  | on one or more of the                       |   |
|     | Supervisor  |                                  |      | Sc                                      | hedule A-1                  | Yes - s  | chedule attached                            |   |
|     | If filing for multiple positions, list ac<br>position(s): (Attach a separate sh |                                  | 5)/  | A. Sacra                                |                             | s than 10% Owne  |   |   |
|     | Agency: Ydlo Solano AQ  | MD                               |      | 10000                                   |                             |  | chedule attached                            |   |
| 1   | Agency: 1000 /DIM 10 110  | 1112                             | 73/1 | l linv                                  | esimenis (10%               | 6 or Greater Own   | 057   |   |
| 34  | Position: Board Member  | <b>-</b>                         |      | (5)3                                    | hedule B<br>al Property     | Yes - s  | chedule attached                            |   |
| - 1 |   |                                  |      | J Sci                                   | hedule C                    | Yes - se   | chedule attached                            |   |
|     | 2. Jurisdiction of Office (Che  | eck at least one bo              | ox)  | Inc                                     |                             | & Business Po  | ositions (Income Other than Gifts           |   |
| - 1 | ☐ State   |                                  |      | 0                                       | hedule D                    | □ Voc. s   | chedule attached                            |   |
|     | Acounty of YDD  |                                  |      | 7 7                                     | ome – Gifts                 | ☐ 1es - s  | chedule attached                            |   |
|     | City of   |                                  |      | Sch                                     | nedule E                    | Yes - so   | chedule attached                            |   |
|     | Multi-County Yalo Solano A  | <b>COMD</b>                      |      | Inco                                    | ome – Gifts –               | Travel Payme   | ents  | ı |
|     | Other   |                                  |      |   |                             | -or-   |   |   |
| L   |   |                                  |      | ,                                       | No reportab                 | le interests o   | on any schedule                             |   |
|     | 3. Type of Statement (Check   | at least one box)                | K .  |   |                             | - W.   |   | _ |
|     | Assuming Office/Initial Date:   |                                  |      | 5. Ve                                   | rification                  | 1  |   | ٦ |
|     | Annual: The period covered is Ja through December 31, 2009.                     | nuary 1, 2009,                   |      | 214 Mars                                |                             |  | diligence in preparing this                 |   |
|     | -Or-  |                                  |      | staten                                  | nent. I have                | e reviewed t   | his statement and to the best               |   |
|     | O The period covered is/_   | , through                        |      | 100000000000000000000000000000000000000 |                             | the informations is true and   | on contained herein and in any discomplete. |   |
|     | December 31, 2009.  | maaan zasma amba sanata TeTe 🗱 l |      | 5000.000.000                            |                             |  | ry under the laws of the State              |   |
|     | Leaving Office Date Left:/_<br>(Check one)                                      |                                  |      |   |                             |  | ing is true and correct.                    |   |
|     | O The period covered is January date of leaving office.                         | 1, 2009, through the             | ne   | Date                                    | Signed                      | 2/9/10   | 2   |   |
|     | -or-  |                                  |      |   | J.g., Su                    |  |   |   |

Signature

(File the originally signed statement with your filing official.)

#### SCHEDULE A-1 Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name<br>Roxocod, Mathow J                               |

| NAME OF BUSINESS ENTITY  | NAME OF BUSINESS ENTITY  |
|--|--|
| Lone Star Strakhouse  GENERAL DESCRIPTION OF BUSINESS ACTIVITY   | GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |
| FAIR MARKET VALUE  \$ \$2,000 - \$10,000   | Horry Furnishings  FAIR MARKET VALUE \$ \$2,000 - \$10,000   \$10,001 - \$100,000  |
| \$100,001 - \$1,000,000 Over \$1,000,000   | 5100,001 - \$1,000,000 Over \$1,000,000  |
| NATURE OF INVESTMENT  Stock Other (Coscribe)  Partnership O Income of \$0 - \$500  Income Received of \$500 or More (Report on Schedule C) | NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income of \$0 - \$500  Income Received of \$500 or More (Report on Schedule C) |
| IF APPLICABLE, LIST DATE:  | IF APPLICABLE, LIST DATE:  |
|  |  |
| NAME OF BUSINESS ENTITY  LIA dell and Pred Flyancial  GENERAL DESCRIPTION OF BUSINESS ACTIVITY   | MAKE OF BUSINESS ENTITY  UTTH Match Powers  GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |
| FAIR MARKET VALUE \$152,000 - \$10,000   | Medical Froducts  FAIR MARKET VALUE  \$ \$2,000 - \$10,000   |
| NATURE OF INVESTMENT Stock Other   | Stock Other (Describe)  Partnership O Income of \$0 - \$500  Income Received of \$500 or More (Report on Schedule C)                       |
| IF APPLICABLE, LIST DATE:  | IF APPLICABLE, LIST DATE:  |
| ACQUIRED DISPOSED  |  |
| NAME OF BUSINESS ENTITY  | ► NAME OF BUSINESS ENTITY  |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY   | GENERAL DESCRIPTION OF BUSINESS ACTIVITY   |
| FAIR MARKET VALUE \$2,000 - \$10,000   | FAIR MARKET VALUE  \$2,000 - \$10,000 \$10,001 - \$100,000  \$100,001 - \$1,000,000 Over \$1,000,000                                       |
| NATURE OF INVESTMENT'  VX Stock Other (Describe)   | NATURE OF INVESTMENT Stock Other (Describe)  |
| Partnership () Income of \$0 - \$500  Income Received of \$500 or More (Report on Schedule C)  | Partnership   Income of \$0 - \$500   Nore (Report on Schedule C)  |
| IF APPLICABLE, LIST DATE:  | IF APPLICABLE, LIST DATE:  |
|  |  |
| ACQUIRED DISPOSED  | ACQUIRED DISPOSED  |
| Comments:  |  |

### SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

|      | RNIA FOR | M 700  |
|------|----------|--------|
| Name |          |        |
| RIVE | ood, M   | athant |

| ► 1. BUSINESS ENTITY OR TRUST  | ► 1. BUSINESS ENTITY OR TRUST   |
|--|---|
| Mendran Paerfiz, Inc.  | Cardinal Communications   |
| 929 UNIVERSITY AK, Sacraments CA   | 979 University Ny Gocamento CA  |
| Address (Business Address Acceptable) 9597.5   | Address (Business Address Acceptable) 9587  |
| Check one  Trust, go to 2  Business Entity, complete the box, then go to 2   | Check one  Trust, go to 2  Business Entity, complete the box, then go to 2  |
| GENERAL DESCRIPTION OF BUSINESS ACTIVITY   | GENERAL DESCRIPTION OF BUSINESS ACTIVITY  |
| Consulting Business  |   |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:   |
| \$2,000 - \$10,000<br>\$10,001 - \$100,000//09//09   | \$2,000 - \$10,000<br>\$10,001 - \$100,000  |
| \$100,001 - \$1,000,000 ACQUIRED DISPOSED  | \$100,001 - \$1,000,000 ACQUIRED DISPOSED   |
| Over \$1,000,000   | Over \$1,000,000  |
| NATURE OF INVESTMENT Sole Proprietorship Partnership   | NATURE OF INVESTMENT Sole Proprietorship X Partnership  |
| YOUR BUSINESS POSITION Managing Partner  | YOUR BUSINESS POSITION OWNCO  |
| TOUR BUSINESS POSITION I INCIDENTIAL TOUR BUSINE | TOOK BUSINESS FUSITION TO   |
| ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)  | ➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)               |
| □ \$0 - \$499 □ \$10,001 - \$100,000   | \$0 - \$499 \$10,001 - \$100,000  |
| \$500 - \$1,000 <b>X</b> OVER \$100,000  | \$500 - \$1,000 OVER \$100,000  |
| ☐ \$1,001 - \$10,000   |   |
| ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF<br>INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)  | ➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF<br>INCOME OF \$10,000 OR MORE (attach a separate sheet of nocessary) |
| su atand   | or atached  |
|  |   |
|  |   |
| ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE<br>BUSINESS ENTITY OR TRUST  | ▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE<br>BUSINESS ENTITY OR TRUST                                     |
| Check one box:   | Check one box:  |
| ☐ INVESTMENT ☐ REAL PROPERTY   | ☐ INVESTMENT ☐ REAL PROPERTY  |
| 200  |   |
| Name of Business Entity or   | Name of Business Entity or  |
| Street Address or Assessor's Parcel Number of Real Property  | Street Address or Assessor's Parcel Number of Real Property   |
|  |   |
| Description of Business Activity or  | Description of Business Activity or   |
| City or Other Precise Location of Real Property  | City or Cther Precise Location of Real Property   |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:   |
| \$2,000 - \$10,000<br>\$10,001 - \$100,000<br>\$10,001 - \$100,000   | \$2,000 - \$10,000<br>\$10,001 - \$100,000<br>\$10,001 - \$100,000  |
| \$100,001 - \$1,000,000 ACQUIRED DISPOSED  | \$100,001 - \$1,000,000 ACQUIRED DISPOSED   |
| Over \$1,000,000   | Over \$1,000,000  |
| NATURE OF INTEREST   | NATURE OF INTEREST  |
| Property Ownership/Deed of Trust Stock Partnership   | Property Ownership/Deed of Trust Stock Partnership  |
| Leasehold Other  | Leasehold Other Other   |
| Check box if additional schedules reporting investments or real property are attached  | Check box if additional schedules reporting investments or real property are attached                                       |
| Comments:  | FPPC Form 700 (2009/2010) Sch. A-2  |

## SCHEDULE B Interests in Real Property (Including Rental Income)

| CALIFORNIA FORM FAIR POLITICAL PRACTICES CO |     |
|---|-----|
| Name  |     |
| Rexroad Mathe                               | w J |

| 120   |   |
|---|---|
| ➤ STREET ADDRESS OR PRECISE LOCATION                              | ► STREET ADDRESS OR PRECISE LOCATION  |
| 711 College Street  | 929 University Axerul   |
| CITY  | CITY  |
| Woodland 1A 95/095  | Sacramento, CA 95825  |
| FAIR MARKET VALUE IF APPLICABLE, LIST DATE:                       | FAIR MARKET VALUE IF APPLICABLE, LIST DATE:   |
| \$2,000 - \$10,000  | \$2,000 - \$10,000  |
| \$10,001 - \$100,000  | \$10,001 - \$100,000  |
| \$100,001 - \$1,000,000 ACQUIRED DISPOSED                         | \$100,001 - \$1,000,000 ACQUIRED DISPOSED   |
| Over \$1,000,000  | Over \$1,000,000  |
| NATURE OF INTEREST  | NATURE OF INTEREST  |
| Ownership/Deed of Trust   | Ownership/Deed of Trust Easement  |
|   |   |
| Leasehold Other   | Leasehold Other   |
| IF RENTAL PROPERTY, GROSS INCOME RECEIVED                         | IF RENTAL PROPERTY, GROSS INCOME RECEIVED   |
| S0 - \$499 S500 - \$1,000 \$1,001 - \$10,000                      | S0 - \$499 S500 - \$1,000 S1,001 - \$10,000   |
| \$10,001 - \$100,000 OVER \$100,000                               | \$10,001 - \$100,000 OVER \$100,000   |
| SOURCES OF RENTAL INCOME: If you own a 10% or greater             | SOURCES OF RENTAL INCOME: If you own a 10% or greater   |
| interest, list the name of each tenant that is a single source of | interest, list the name of each tenant that is a single source of                                 |
| income of \$10,000 or more.                                       | income of \$10,000 or more.   |
| Towid Wade - Renter   | meridian Pacifiz  |
|   | Cardenal Communications   |
|   | Latora continuitation   |
| and loans received not in a lender's regular course of            | lic without regard to your official status. Personal loans business must be disclosed as follows: |
| NAME OF LENDER*   | NAME OF LENDER*   |
| ·   |   |
| ADDRESS (Business Address Acceptable)                             | ADDRESS (Business Address Acceptable)   |
|   |   |
| BUSINESS ACTIVITY, IF ANY, OF LENDER                              | BUSINESS ACTIVITY, IF ANY, OF LENDER  |
| INTEREST RATE TERM (Months/Years)                                 | INTEREST RATE TERM (Months/Years)   |
| %  \[ \] None   | % None  |
|   |   |
| HIGHEST BALANCE DURING REPORTING PERIOD                           | HIGHEST BALANCE DURING REPORTING PERIOD   |
| S500 - \$1,000 S1,001 - \$10,000                                  |   |
| (2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4        | S500 - \$1,000 S1,001 - \$10,000  |
| S10,001 - \$100,000 OVER \$100,000                                | S500 - \$1,000 S1,001 - \$10,000 S10,001 - \$100,000 OVER \$100,000                               |
|   | S10,001 - \$100,000 OVER \$100,000  |
| S10,001 - \$100,000 OVER \$100,000  Guarantor, if applicable      |   |
|   | S10,001 - \$100,000 OVER \$100,000  |
|   | S10,001 - \$100,000 OVER \$100,000  |

### SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

| CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION |
|---|
| Name  |
| Regrood, Mathew J                                       |

| NAME OF SOURCE OF INCOME  | NAME OF SOURCE OF INCOME   |
|---|--|
| David Wade  | Mendian Partie   |
| ADDRESS (Business Address Acceptable)  711 B College St Woodland  BUSINESS ACTIVITY, IF ANY, OF SOURCE  | ADDRESS (Business Address Acceptable)  925 UNIVERSITY AVC SURAMONDO, I BUSINESS ACTIVITY, IF ANY, OF SOURCE  |
| YOUR BUSINESS POSITION  | Consulting YOUR BUSINESS POSITION  |
| Course of Rental Unit   | Managny Portry   |
| GROSS INCOME RECEIVED   | GROSS INCOME RECEIVED  |
| \$500 - \$1,000 \$1,001 - \$10,000  | \$1,001 - \$10,000<br>\$1,001 - \$100,000<br>OVER \$100,000  |
| \$10,001 - \$100,000 OVER \$100,000   | S10,001 - \$100,000 OVER \$100,000   |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED   | CONSIDERATION FOR WHICH INCOME WAS RECEIVED  |
| Salary Spouse's or registered domestic partner's income   | Salary Spouse's or registered domestic partner's income  |
| Loan repayment  | Loan repayment   |
| Sale of(Property, car, boat, etc.)  | Sale of  |
|   | (Property, car, boat, etc.)  |
| Commission or Rental Income, list each source of \$10,000 or more   | Commission or Rental Income, list each source of \$10,000 or more  |
|   |  |
| □ ou  |  |
|   |  |
| Other (Describe)  | Other(Describe)  |
|   | (Describe)   |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made  | I lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms your official status. Personal loans and loans received  |
| *You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be   | I lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms your official status. Personal loans and loans received  |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  | I lending institutions, or any indebtedness created as part<br>e in the lender's regular course of business on terms<br>your official status. Personal loans and loans received<br>disclosed as follows:   |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be  | I lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)   | I lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None                                      |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)   | I lending institutions, or any indebtedness created as part in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  Wone  SECURITY FOR LOAN  Personal residence |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER   | I lending institutions, or any indebtedness created as pare in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:  INTEREST RATE  TERM (Months/Years)  None  SECURITY FOR LOAN                     |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER   | I lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:    INTEREST RATE   TERM (Months/Years)   |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD                  | I lending institutions, or any indebtedness created as pare in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:    INTEREST RATE   TERM (Months/Years)   |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD                  | I lending institutions, or any indebtedness created as pare in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:    INTEREST RATE   TERM (Months/Years)   |
| * You are not required to report loans from commercia of a retail installment or credit card transaction, made available to members of the public without regard to not in a lender's regular course of business must be NAME OF LENDER*  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER  HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000 | I lending institutions, or any indebtedness created as partie in the lender's regular course of business on terms your official status. Personal loans and loans received disclosed as follows:    INTEREST RATE   TERM (Months/Years)   |

#### Sources of Gross Income of \$10,00 or more in 2009

Meridian Pacific, Inc. 925 University Avenue Sacramento, CA 95825

The New Majority 949 South Coast Drive, Suite 600 Costa Mesa, CA 92626

Wal Mart 702 SW 8<sup>th</sup> Street Bentonville, AR 72716

Linda Ackerman for Assembly 2150 River Plaza Drive #150 Sacramento, CA 95833

Disney Po Box 3232 Anaheim, CA 92803

Save Our Anaheim Resort C/O Bell, McAndrews & Hiltachk 455 Capitol Mall, Suite 801 Sacramento, CA 95814

Poizner, Steve for Governor 530 Capitol Mall, Suite 220 Sacramento, CA 95814

Newport Beach Chamber of Commerce 1470 Jamboree Road Newport Beach, CA 92660

Mercury Public Affairs, LLC 1414 K Street, 6<sup>th</sup> Floor Sacramento, CA 95814

Californians Against Higher Property Tax 3001 Douglass Blvd, Suite 225 Roseville, CA 95661

Regents of the University of California 1111 Franklin Street, 6<sup>th</sup> Floor Oakland, CA 94607

Runner, George for Board of Equalization PO Box 984 Willows, CA 95988

Apex Strategies 1215 K Street, Suite 1510 Sacramento, CA 95814

San Bernardino Water District PO Box 710 San Bernardino, CA 92401

Voters First Act for Congress 2350 Kerner Blvd., Suite 250 San Rafael, CA 94901

Aiona, James for HI Governor PO Box 1130 Honolulu, HI 96807

Fiorina, Carly for US Senate 455 Capitol Mall, Suite 801 Sacramento, CA 95814

Cardinal Communication Strategies, LLC 925 University Avenue Sacramento, CA 95825

Matt owns part of Cardinal as an individual.

Budget Reform Now 591 Redwood Highway, Suite 4000 Mill Valley, CA 94941

Political Dynamics 1029 K Street, Suite 44 Sacramento, CA 95814

McClintock, Tom Congressman

508 Cannon Building Washington, DC 20515

Meridian Central Public Affairs, LLC 2937 S. 120<sup>th</sup> Street Omaha, NE 68144

National Republican Senatorial Committee 425 2<sup>nd</sup> Street NE Washington, DC 20002

East Meridian Strategies, LLC 123 South West Street Alexandria, VA 22314

Republican National Committee 30 First Street Washington, DC 20003

East Meridian Strategies, LLC 123 South West Street Alexandria, VA 22314 Note: Meridian Pacific owns part of this company.

Mike DeWine for Ohio 2587 Conley Road Cedarville, OH 45314

Hoekstra for Governor PO Box 1287 Holland, MI 43423

West Meridian, LLC 914 164<sup>th</sup> Street SE #343 Mill Creek, WA 98012 Note: Meridian Pacific owns part of this company.

Washington State GOP 2840 Northrup Way, Suite 140 Bellevue, WA 98004

Direct Impact 99 Canal Center Plaza, Suite 400 Alexandria. VA 22314 Meridian Central Public Affairs, LLC 2937 S. 120<sup>th</sup> Street Omaha, NE 68144 Note: Meridian Pacific owns part of this company.

Daub for Mayor PO Box 241966 Omaha, NE 68124

DCI Group 2340 E. Beardsley Road, Suite 100 Phoenix, AZ 85024

Disabled American Veterans 6285 Pearl Road, Suite #7 Parma Heights, OH 44130

Nebraska Workers Rights PO Box 80905 Lincoln, NE 68501

Stothert, Jean 5909 South 118<sup>th</sup> Plaza Omaha, NE 68137